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MN021401. WASP Trains Sailors To Be Medical Force Multipliers
By JO1(SW) Crystal M. Raner, USS WASP (LHD 1)

ON BOARD USS WASP - When USS WASP (LHD 1) returns from its six month deployment as the flagship for the WASP Amphibious Ready Group, it will be bring home freshly-trained technicians who will know how to respond to medical emergencies.

Last month, the ship's medical department began teaching an Emergency Medical Technician (EMT) Course to medical and non-medical personnel. Formal instruction and clinical work will continue through June.

"EMTs can mean the difference between life and death," said LT Greg Gellman, MC, who is spearheading the training. "I have come across many incidents where the training an EMT received was the difference between a quick trip to the hospital or a slow one to the morgue. They are trained to act in situations where most people can't. An EMT is taught how to reduce risk to the patient, himself and their partners."

WASP is the first large amphibious ship to host an EMT course for medical and non-medical personnel. By training non-medical personnel as EMTs, WASP's medical department will have additional personnel to assist with casualties.

Several of WASP's 28 Hospital Corpsmen are enrolled in the course. Hospital Corpsman "A" school teaches routine medical procedures, but as qualified EMTs, corpsmen become even greater assets to the Navy Medicine team. In certain situations, such as when physicians aren't present or are exceptionally busy, EMT-trained corpsmen have the additional knowledge necessary to take command of the scene and the patient until a more skilled provider is available.

"We use our EMTs in our emergency response team as our first responders," said Gellman. "They are best at sizing up a situation and making the scene safe for other rescuers and more importantly the patient. Our corpsmen are highly specialized in sick call and their specific fields, but EMT training allows them to be more autonomous in an emergency situation."

Some of the students have prior training in cardiopulmonary resuscitation (CPR) and learned how to properly strap an injured Sailor into

a stretcher as part of their required shipboard training. But to most of the students, the medical field is foreign.

As an operation's specialist temporarily assigned to WASP's Safety and Education department OS1 Cecil Hawkins spends most of his day ensuring the safety of the ship's environment. At night, however, he learns human anatomy, how to take vital signs and other general medical skills.

"I have always been interested in the medical field," said Hawkins. "When I retire from the Navy, I hope to put to use the knowledge and skills I learned in the EMT course. Even if I'm not working in medicine full-time, having this additional knowledge can mean the difference between life and death to an injured person."

The EMT course includes more than 118 hours of classroom instruction and 10 hours of clinical time in the medical department.

When WASP returns to its homeport of Norfolk, Va., students who complete the EMT Course will be able to take the Commonwealth of Virginia's written and practical exam, challenge the National Registry's exam and earn their EMT certification.

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MN021402. Jacksonville's Volunteers Better Lives in Community

By Loren A. Barnes, Naval Hospital Jacksonville

JACKSONVILLE, Fla. - Exchanging stethoscopes and needles for hammers and saws, eight Naval Hospital Jacksonville, Sailors recently volunteered for a "Shipmates With Heart" project at a home on Jacksonville's north side.

Shipmates With Heart is a volunteer community outreach program coordinated aboard Naval Air Station Jacksonville by the United Services Organization (USO). The USO works with the Jacksonville Housing Partnership, a non-profit organization, to marshal the resources of local government, civic and business organizations to bring better living conditions to low-income families throughout Jacksonville.

Through the USO's efforts, Jacksonville volunteers, including many from the hospital, have contributed thousands of hours to the program. The volunteers lend their building skills for badly needed home repairs and construct wheelchair ramps to provide greater mobility for wheelchair-bound residents. On this most recent project, hospital volunteers were: volunteer coordinator HM1 Joseph Tarver, DT3 David Flores, HM2 Andray Williams, HN Elbert Hawkins, SH2 Juan Natal; HM3 Merv Rollinson; HM1 Irmo Sanchez and HM3 Christopher Lunsford.

The hospital regularly provides volunteers to help with the program. Tarver said that each volunteer brings to the project their own unique capabilities and everyone learns new skills. He said that anyone can volunteer regardless of his or her prior carpentry experience.

"We take anyone that wants to help out. The Housing Partnership pros will teach you the carpentry skills," he said.

Williams, a first time Shipmates With Heart volunteer, said this was an exciting opportunity.

"It was just a great chance to represent the U.S. Navy and the Naval Hospital and to help some people who need it," he said. "It is definitely something I'd do again."

The program's coordinators are glad for the help as they have plenty of work to do. On-site Jacksonville Housing Partnership coordinator Doug Davis said the volunteers have been completing one or two ramps per day over recent months.

"The most special moment comes when they've completed a ramp and the owners come out and try them," Davis said. "Sometimes the person in the wheelchair has rarely been out of the house for months. Sometimes they even get tears in their eyes."

For information on Navy community service programs, go to www.chaplaincare.navy.mil/index.htm <<http://www.chaplaincare.navy.mil/index.htm>> and select "Community Service Projects" on the home page.

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MN021403. Fleet Hospital Cooks Serve It Up

BY JOC Bill Austin, Fleet Hospital 20

GUANTANAMO BAY, Cuba - Before dawn, MS1 Marlon Williams and MS3 Wanda White are up, cooking breakfast to jump-start the day for military men and women who guard Taliban and al-Qaida detainees at Camp X-Ray, Guantanamo Bay, Cuba.

Both are members of Fleet Hospital 20, an air-conditioned pharmacy, lab, operating room, and recovery and receiving ward that cares for Taliban and al-Qaida detainees. The Fleet Hospital deploys with a small contingency of Seabees, journalists, mess specialist and other rates that most may not associate with a medical facility.

Williams and White are the only mess specialists who belong to the Fleet Hospital, deployed here for two months from Naval Hospitals Camp Lejeune, N.C., and Charleston, S.C. Williams and White's duties range from cooking to cleaning and serving the hospital galley's patrons three meals daily.

During breakfast, preparations for the noon meal are already in full swing. Giant pots - "coppers" to the cooks - are filled with hamburger and seasoning that will slow-cook till lunch. In the bakery, a civilian Jamaican employee is rolling out dough for fresh bread. Freshly baked chocolate chip cookies cool on racks.

"Our part of the mission is extremely important. No one would be able to do his or her job without us. Everybody's got to eat," said White, with a big smile.

On the loading dock outside, Williams is loading vegetable boxes on a cart. "It's definitely an experience being here in Cuba. I'm working with all branches of the military here. We have come together as one team and it's working out well," he added.

"The true success of the fleet hospital depends on a lot of support personnel. They really make things happen," said Fleet Hospital 20's Command Master Chief CMC Clifford Phillips. "Without a doubt, the folks who provide us with electricity, plumbing, and generally keep us comfortable in our camp, are vital to our team. One of the most important things when you are deployed anywhere in the world, whether it's in Guantanamo Bay, Cuba or the middle of nowhere, is being able to depend on a hot meal at least twice daily. Our mess specialists personally see to it we are well taken care of in that department. They do a fantastic job."

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MN021404. Portsmouth Offers Parent and Sibling Schools

By JO3 Theresa Raymond, Naval Medical Center Portsmouth

PORTSMOUTH, Va. - Expecting a new baby in the family can be overwhelming, but Naval Medical Center Portsmouth is eliminating some of the apprehension by offering programs and classes to new parents and siblings.

Classes range from budgeting to breastfeeding to how to be a big brother or sister. These classes help parents, family members and even friends know what to expect when baby arrives home.

Classes don't stop after the baby is born. Continuing education on how to care for the baby is encouraged for new moms and dads. The classes provide the latest information on problems that may arise after childbirth such as postpartum depression.

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MN021405. Reservists Train In Trauma and Emergency Care

FORT SCHULAR, N.Y. - More than 80 Naval Reservists of Fleet Hospital Fort Dix, N.J. recently received special training at a trauma and emergency care symposium in Fort Schular.

Civilian and military instructors provided information on chemical warfare, adult and pediatric trauma, and management of patients with neurological, orthopedic, abdominal and burn injuries at the Naval Reserve Fleet Hospital Fort Dix Trauma and Emergency Care Symposium.

A highlight of the training was a presentation by Army Reservists Col. Kenneth Swan, MC, who spoke on wound triage.

LCDR ADAM Litchman, MC, who hopes to make the training an annual event as an efficient way to prepare Reservists for combat casualties, organized the two-day event.

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MN021406. Navy Websites Provide Health Information

By Sgt. 1st Class Kathleen T. Rhem, USA American Forces Press Service

WASHINGTON, DC - Medical professionals agree that a well-informed patient is a better patient. Patients who learn about wellness and their own conditions, the reasoning goes, are better able to participate in their treatment and follow their doctors' instructions.

Navy Medicine operates two comprehensive health and wellness information Web sites. The Virtual Naval Hospital, www.vnh.org, includes links to hundreds of articles on dozens of topics, including archived "HealthWatch" health information and self-care articles from Navy and Marine Corps Medical News.

Individuals can get information on subjects such as back and musculoskeletal injuries, cholesterol, eye and hearing protection, dental care, and pregnancy and family planning. Wellness information on tobacco-use cessation, alcohol-abuse and domestic-violence prevention, nutrition, and personal hygiene can also be found on this site.

The site's psychological wellness section includes information on stress management, including combat stress and suicide prevention. There is also a separate section dedicated to women's health issues, such as breast cancer, mammography, Pap tests, and osteoporosis.

Navy's Lifelines Web site also includes health-related information at www.lifelines2000.org/services/medical/index.asp.

The site includes links to practical information such as when to call the pediatrician about a child's illness, how to find online information on military treatment facilities, and how to update Defense Eligibility Enrollment Reporting System information.

The Naval Environmental Health Center's website also provides a host of information, but focuses on keeping well by eating right, exercising, and early recognition of health problems. It includes downloadable resources, such as the Navy Personal Training Plan Booklet, www-nehc.med.navy.mil/hp/fitness/personaltraining_plan.htm, and a nutrition site, www-nehc.med.navy.mil/hp/nutrit/index.htm, that has information about eating right for optimum health and healthful, tasty and easy recipes.

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MN021407. Early Enrollment Opens for Long-Term Care Insurance

By Sgt. 1st Class Kathleen T. Rhem, USA, American Forces Press Service

WASHINGTON, DC - A period of early enrollment into the new Federal Long-Term Care Insurance Program is now open. Federal personnel managers estimate as many as 20 million people are eligible to use this new benefit.

The federal Office of Personnel Management has contracted with John Hancock and MetLife insurance companies to provide this additional benefit for all federal employees, including military, and (military) retirees.

The insurance program is designed to cover expenses associated with long-term care in a nursing home or in the beneficiary's home. Federal employees will be able to purchase the insurance for themselves, spouses, children and parents. Federal retirees are entitled to enroll only themselves and their spouses, according to information on the program's Internet homepage at www.opm.gov/insure/ltc.

"The Federal Long Term Care Insurance Program is an option that can protect us emotionally, financially and socially at a time when family members face unimagined challenges," OPM Director Kay Coles James said last week. "With access to long-term care insurance, we can act responsibly by planning well in advance for future care costs, giving us more time to focus our love and attention on what's really important -- family."

The early enrollment period began March 25 and runs until May 15. An initial six-month-long open enrollment season begins July 1. Officials stressed the early enrollment period is designed to accommodate people who are familiar with long-term care insurance and know what coverage they wish to purchase.

Those who still have questions should wait until the open season. An information campaign under way now will help educate people about the benefit by the open enrollment period, officials said.

Applicants may be required to answer health-related questions, provide medical records or be interviewed personally to be eligible for the insurance.

During early enrollment, pre-packaged policies can be purchased for three- or five-year periods, with daily benefits of \$100 or \$150. Individuals wishing greater flexibility can buy policies with daily benefits from \$50 to \$300. Additional plan options, including an unlimited benefit, will be available during the regular open enrollment, according to an OPM news release.

For individuals between ages 18 and 30, premiums are \$8.40 per month for a policy that offers daily benefit of \$100 over three years and after a 90-day waiting period; the same policy with inflation protection starts at \$32 a month. After age 30, premiums will vary based on age, amount and length of coverage, the waiting period before benefits kick in and other factors, the release said.

Long-term care is not medical care but rather is designed to help people with chronic conditions to perform daily life functions, such as getting out of bed, dressing, eating and going to the bathroom. Care can be received in a home, hospital, nursing home, assisted living facility, adult day care center or hospice.

Experts caution that since long-term care is not medical care, it isn't covered by many medical insurance plans, including Medicare and TRICARE.

For full details, including premiums, packages, benefits, rules and how to enroll, visit the OPM Long-Term Care Insurance Web site at www.opm.gov/insure/ltc/ or the LTC Partners web site at www.ltcfeds.com/ or call the LTC toll-free number at 1-800-LTC-FEDS (1-800-582-3337) or TDD 1-800-843-3557

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MN021408. Mobilized Reservists Receive TRICARE Benefits

WASHINGTON, DC - Naval Reservists mobilized for Operation Enduring Freedom will receive full military health benefits even if they and their families seek treatment from civilian health care providers.

The Department of Defense and TRICARE have worked together to formulate

several changes to make health care more accessible and the TRICARE program more beneficial to those reservists called for duty. Among the changes:

- Waives the deductibles for TRICARE Standard and TRICARE Extra to avoid undue financial hardship for families who may have paid an annual deductible under non-military providers.

- Pays 15 percent above the TRICARE allowable rates for care provided by non-participating providers. Some doctors do not participate in TRICARE provider networks and are allowed by law to charge up to 15 percent above TRICARE Standard approved expenses.

- Waives the requirement for Non-Availability Statements for inpatient care in civilian hospitals when family members of activated reservists live outside a military treatment facility (MTF) area.

Once reservists are activated, they are considered TRICARE Prime enrollees. If members receive orders for more than 30 consecutive days, spouses and eligible children are eligible for TRICARE Extra and Standard coverage on the first day of their sponsor's orders. If those orders are for 179 days or more, family members may enroll in TRICARE Prime, with no pharmacy co-payments at military hospitals or clinics.

While TRICARE Prime may be the most comprehensive and cheapest benefit for active duty families, with no enrollment fees or co-pays, some families may elect to continue to receive medical treatment with their civilian healthcare providers. In these instances, families may elect to utilize their TRICARE Standard or Extra benefit. Under TRICARE Standard, beneficiaries pay 20 percent of the allowable charge. TRICARE Extra offers discounted cost shares (15 percent of negotiated fees) when TRICARE network providers are used. All TRICARE options cap reservist out-of-pocket expenses at an annual catastrophic limit of \$1,000. TRICARE benefits are retroactive to the first day of orders.

Before using the TRICARE benefit, reservists should ensure that their family information is updated in the Defense Enrollment Eligibility Reporting System (DEERS). Beneficiaries may go online to find the three closest personnel offices or ID card facilities at www.dmdc.osd.mil/rsl/. For more information about DEERS enrollment, beneficiaries may contact the Defense Manpower Data Center Support Office (DSO) Telephone Center at 1-800-538-9552.

Mobilized Reservists receive Dental care from military dentists and they are not eligible for the TRICARE Dental Program (TDP). Families, however, may enroll. Information can be obtained by calling 1-888-622-2256 or visiting www.ucci.com/tdp/tdp.html. Single enrollment is now \$7.90 while family enrollment is \$19.74. Members of the Individual Ready Reserve (IRR) (other than the Special Mobilization Category) and the family members of the Selected Reserve will pay a new monthly premium of \$19.75 for a single enrollment and \$49.36 for a family enrollment.

Eligible family members are invited to enroll, even if the military sponsor does not. Family members are responsible for the full premium, except when the military member is called to active duty for more than 30 consecutive days, which reduces the premium share to 40 percent, with the government paying the rest.

Family members are not bound by the 12-month minimum enrollment period in TDP if the service member is called to duty for a contingency operation as defined by law. In this instance, you have 30 days from activation to submit an enrollment application. Family members must remain enrolled throughout the entire active duty period for the contingency.

These programs are a part of the TRICARE Reserve Family Demonstration Project and combine three key areas: First, the annual deductible for families who use TRICARE Standard or Extra are waived. Second, family members who receive care from "participating" or "non-participating"

providers pay the same amount: 20 percent of the allowable charge. Family members are not legally responsible for the balance above the TRICARE allowable charge that some non-participants charge. Third, the requirement to obtain non-emergency inpatient care from a military treatment facility is waived, which allows for continuity in treatment by their civilian providers.

Family members who continue to receive treatment from the civilian sector should be aware that TRICARE pays after their personal health care plan and becomes the primary provider only when Medicaid is involved or an individual insurance policy is specifically designated as a TRICARE supplemental policy. In those cases, TRICARE pays before the other insurance.

TRICARE Standard users should contact the Health Care Finder in their local area to ensure their provider has been certified or authorized by the regional TRICARE contractor. If they are not certified or authorized, the government, even if otherwise covered, will not share the cost of the services.

For more information regarding all of the TRICARE programs and treatment options, reservists may contact the nearest TRICARE service center or pick up a TRICARE Standard Handbook at the nearest uniformed services hospital or clinic or write to: TRICARE Management Activity, 16401 E. Centretech Parkway, Aurora, Co. 80011-9043. Information is also available on the TRICARE Web site at www.tricare.osd.mil, the Reserve Affairs Web site at www.defenselink.mil/ra, the Naval Reservist News (www.navres.navy.mil/navresfor/nrn/past/dec01/stories/2a.html) or by calling the worldwide TRICARE Information Center at 1-888-363-2273.

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MN021409. Healthwatch: Preventing Agony of The Feet
By Brian Badura, Bureau of Medicine and Surgery

Feet take a lot of abuse on a daily basis. An average day of walking at home and work can put a tremendous strain on them. Yet, they are one of the most resilient parts of your body.

According to the American Podiatric Medical Association (APMA), most people take between 8,000 and 10,000 steps a day. At that rate, the average person covers several miles a day and about 115,000 miles in a lifetime. As we take each step, our feet cushion pressure that can be equal to many times our own body weight.

April is Foot Health Awareness Month and provides us with an opportunity to review some general foot care guidelines.

Studies show that 75 percent of Americans experience some degree of foot problem during their lifetime. Common foot ailments include athlete's foot, blisters, foot odor, and ingrown toenails.

Navy healthcare providers see a wide range of foot problems, according to LCDR Craig Williams, MSC, Navy Medicine's podiatry specialty leader.

"Many foot problems and trips to the doctor could be avoided by giving them proper attention early on," he said.

Feet can often reveal more serious general health problems.

Misaligned toe joints can lead to bunions, an often-painful deformity that may require surgery to correct. Initial symptoms for arthritis, diabetes, and nerve and circulatory disorders often show in feet well before other symptoms are apparent.

Regular hygiene is the most essential component of foot care. Wash feet daily with soap and water and dry them completely. Change shoes and socks frequently to decrease moisture and keep feet dry. Trim nails straight across and slightly longer than the end of the toe.

Footwear can help prevent many common foot ailments.

"Make sure your shoes fit properly and replace them regularly," said Williams. "Shoes often break down and lose their support before we think of replacing them." Footwear that is too wide or too narrow can exacerbate existing foot problems and cause uncomfortable pain.

Doing too much too quickly when working out can also lead to injuries. "Doing the same exercise every day can cause more injuries than exercising three days a week, because the same body parts are being used too much," said Williams. He recommends varying the type of exercise for those who choose to work out daily.

To treat minor injuries, Williams recommended some home care tips. "For new injuries (less than 48 hours), use cold, elevation and rest. After 48 hours, use a hot/cold contrast, but always end with ice," he said.

Many foot problems often go untreated, mainly because many people believe that foot pain is a normal part of life. Foot pain should not be ignored. If problems persist, see your healthcare provider or podiatrist specialist for treatment.

For more information, visit the APMA web site at www.apma.org.

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